

Remodel PLUS...

Clear Paths to Success & Working with Unknowns

A One-Day Seminar

FOCUS:

Project Initiation

- Defining Project Intent
- Assessing Existing Conditions
- Assembling the Project Team
- Project Constraints and Opportunities

Impacts and Resources

- Identify Project Drivers
- Available OSHPD Resources

Intro to Remodel CAN 2-102.6

- Defining a Remodel Project
- Define Change of Use, Function and Occupancy

Project Scoping, Design and Permitting

- Fire/Life Safety in Design
- Including Accessibility
- Energy Code for Remodels
- Review OSHPD 1R

Construction

- Starting Construction
- Inspections
- Compliant vs Non-Compliant
- Construction in an Operating Facility
- Project Closeout

Wednesday, November 6

Crowne Plaza Sacramento

5321 Date Avenue

Sacramento, CA 95841

(916) 338-5800



Thursday, November 14

Embassy Suites Santa Ana

Orange County Airport

325 East Dyer Road

Santa Ana, CA 92705

(714) 241-3800

SOLD OUT!

SEMINAR INFORMATION:

\$170 per person Includes breakfast, buffet lunch, with morning and afternoon refreshments

7:30 am—8:30 am Registration & Breakfast

8:30 am—4:00 pm Seminar (incl. one-hour lunch)

REGISTER ONLINE:

<https://payments.oshpd.ca.gov/hbsb/>

❖ No refunds for cancellations received less than one week prior to the event or for no-shows.

❖ Registered attendees will receive an email with a link to the seminar materials approximately one week before the seminar. Please note: Hard copies/binders will not be provided at the seminar.

❖ Questions: FDD.Seminar@oshpd.ca.gov or (916)440-8453

Remodel PLUS...

Seminar Registration Form

Three ways to Register:

Online:

<https://payments.oshpd.ca.gov/hbsb/>

Mail:

OSHPD – Hospital Building Safety Board
Attention: Evett Torres
2020 West El Camino Avenue, Ste. 800
Sacramento, CA 95833

Questions:

email hbsbsupportstaff@oshpd.ca.gov
or call (916) 440-8453

Payment:

☐ **Check Enclosed.** Make check payable to OSHPD

☐ **Credit Card** (check one): ☐ **VISA** ☐ **MC** ☐ **AMEX**

Card Number: _____

NAME on Card): _____

Expiration Date: _____ Security Code: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Authorizing Signature: _____

WHICH SEMINAR DO YOU PLAN TO ATTEND?

☐ **Sacramento—November 6, 2019**
Crowne Plaza Hotel Sacramento
5321 Date Ave, Sacramento, CA

☐ **Santa Ana—November 4, 2019**
Embassy Suites Santa Ana Orange Co. Airport
13155 East Leyer Rd., Santa Ana, CA

SOLD OUT!

Registration Fee: \$170 per person

TOTAL FEE (All Registrants): \$ _____

Registrant Information:

Registrant 1:

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Email (required): _____

Please select which most closely describes you:

- ☐ Hospital Owner
- ☐ Architect
- ☐ Structural Engineer
- ☐ MEP Engineer
- ☐ Construction
- ☐ IOR
- ☐ Other _____

Registrant 2:

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Email (required): _____

Please select which most closely describes you:

- ☐ Hospital Owner
- ☐ Architect
- ☐ Structural Engineer
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- ☐ IOR
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